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ABSTRACT

The guide is intended as an informational resource for members of community agencies or contracted service providers who are involved in the education and/or welfare of emotionally handicapped (EH) students. Following a definition of EH students, the first of eight brief sections outlines procedures for referral and evaluation, case conference responsibilities and participants, the individualized education program (IEP), and the annual case review. The second section describes due process and procedural safeguards, while the third focuses on the concept of continuum of services. Section 4 addresses specific areas of EH programming, including IEP implementation and curriculum components (academics, vocational education, classroom and behavior management, affective education). Section 5 treats the topic of facilitating interagency cooperation and offers 20 tips to enhance communication among professionals. Section 6 discusses the role of surrogate parents in relation to the education of EH students, while Section 7 focuses on confidentiality. A final section addresses issues related to the provision of contracted services for EH students. Five supplementary forms and checklists are appended, and a glossary and bibliography conclude the document. (JW)

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RESOURCE GUIDE FOR COMMUNITY AGENCIES AND
CONTRACTUAL SERVICE PROVIDERS
FOR EMOTIONALLY HANDICAPPED STUDENTS

Division of Special Education
Indiana Department of Education

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TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)

Indiana Committee on the Emotionally Handicapped
Shirley J. Amond, Chairperson

June 1987

EC 212258

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Under the leadership of the Indiana State Advisory Council on the Education of Handicapped Children and Youth, the Indiana Committee on the Emotionally Handicapped has continued its efforts to resolve those issues which inhibit the development of programs for seriously emotionally handicapped students.

This publication is the result of the cooperative efforts of many individuals. Those individuals have contributed time and shared their expertise toward the completion of this activity.

To all those who served on the committee, a special note of thanks is expressed. The sharing of information and personal skills in the research, writing, and editing of this publication is deeply appreciated.

The committee members wish specifically to recognize the staff of the Indiana Special Education Administrators' Services, Dr. William R. Littlejohn, Director, and Connie Cutter and Linda Wolf, support personnel, for their dedicated efforts on behalf of the project. Their contributions have been invaluable.

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Resource Guide for Community Agencies and Contractual Service Providers

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PREFACE

The purpose of this document is to provide an informational resource guide for members of community agencies or contracted service providers who are involved in the education and/or welfare of emotionally handicapped (EH) students. It is hoped that it will serve as a basis for the development of coordinated efforts by these groups and public schools to enhance the provision of services necessary for the EH student.

DEFINITION

A seriously emotionally handicapped (SEH) child is a child with a severe condition exhibited over a long period of time to a marked degree which adversely affects educational performance and is characterized by one or more of the following: (a) an inability to learn which cannot be explained by intellectual, sensory, or health factors (including children who are autistic); (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teacher; (c) an inappropriate type(s) of behavior or feeling under normal circumstances (does not include children who are only socially maladjusted); (d) a general pervasive mood of unhappiness or depression; and (e) a tendency to develop physical symptoms or fears associated with personal or school problems.

Indiana Rule S-1
P.L. 94-142

In general, an emotionally handicapped student has problems involving lack of awareness and/or understanding of self and environment of such duration, frequency, or intensity as to result in an inability to control behavior or express feelings appropriately, thereby significantly impairing performance in the classroom and in school-related activities. The general characteristics include one or more of the following:

- (a) an inability to learn which cannot be explained by intellectual, sensory, or health factors (including children who are autistic).

Significant deficits in the level of functioning may be the most pronounced characteristic of emotionally handicapped children in school. This significant deficit in the learning process may be manifested as impairments in classroom performance and school learning experience as well as failure to master skill subjects. The difference between a child's performance and level of expectancy becomes more significant as a student advances through his school career. This discrepancy may appear to be insignificant in a child's early school years, therefore, making it more difficult to identify a young student based on the inefficiency in functioning level.

- (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

The term "satisfactory interpersonal relationships" refers to the ability to establish and maintain close friendships; the ability to work and play cooperatively with others; the ability to demonstrate sympathy, warmth, and sharing with others; the ability to be assertively constructive; and the ability to make appropriate choices for social interaction. In most instances, children who have difficulty building or maintaining satisfactory interpersonal relationships are readily identified by both peers and teachers.

- (c) an inappropriate type(s) of behavior or feeling under normal circumstances (does not include children who are only socially maladjusted).

Behavior is seen as inappropriate when disturbed internal states lead to socially aberrant or self-defeating behavior; that is, behavior which is clearly discordant with that which would normally be expected.

- (d) a general pervasive mood of unhappiness or depression.

Children who are unhappy or depressed may exhibit a loss of interest or pleasure in all or most all usual activities and pastimes. These behaviors may be expressed verbally or nonverbally, as in frequently sad facial expression, changed peer relations, social isolation, reduced academic achievement, hyperactivity, or restless agitated behavior.

- (e) a tendency to develop physical symptoms or fears associated with personal or school problems.

A child may exhibit physical symptoms such as excessive fatigue, dizziness, nausea, rashes, or an unexplained loss of or alteration in physical functioning; unrealistic fears, such as harm to parents or occurrence of calamities; or pains, such as headaches or stomachaches. Possible physical etiologies should be ruled out prior to attributing the behavior(s) to a psychogenic cause.

SECTION 1

PROCEDURES - ASSESSMENT TO PLACEMENT

A. Referral

REFERRAL is the first step in the process of obtaining an evaluation for a student who may be in need of special services. A referral may be made by the parents, the student, teacher, school administrator, or specialists. If a referral for evaluation is made by someone other than the student's parents, the parents must give written consent before an evaluation can be initiated.

B. Evaluation

EVALUATION is the process of gathering information about a student. An evaluation can assist the parents and the school in better understanding how the student learns, what his/her strengths and weaknesses are, and any unique problems that the student might be experiencing. Parents play a major role in an evaluation by sharing what they know about their child with others.

No single test or method of evaluation can be used as the sole criterion for determining the student's eligibility for special education.

Suggested information that could be included in an evaluation are:

- intelligence
- academic performance
- physical development
- adaptive behavior
- social interaction (getting along with others)
- emotional development
- speech and language
- hearing and vision
- learning style (how the student learns)

C. Case Conference

A CASE CONFERENCE is a scheduled meeting of school personnel, parents (guardians or surrogate parents), appropriate specialists, the child, if appropriate, and other individuals at the discretion of the parent or school to develop, review, and revise a handicapped student's individualized education program (IEP). When a student is initially referred for evaluation, parents meet with school personnel within 40 school days following the referral date to discuss the results of the evaluation and plan for the student's educational future.

1. Responsibility of the Case Conference Committee

The case conference team is responsible for:

- determining if a student is eligible for special education, and if so;
- planning and writing the individualized educational program (IEP);
- recommending a placement in the least restrictive environment -- a setting which is appropriate to meet the student's needs;
- assigning responsibilities for carrying out the individualized education program;
- evaluating the success of the plan in meeting the needs of the student; and
- recommending changes in IEP and/or placement, if needed.

2. Participants and their Roles in the Case Conference Committee

- a. A QUALIFIED REPRESENTATIVE OF THE SCHOOL (i.e., principal, director of special education, etc.): Chairs the conference and helps determine eligibility for any special education placement and analyzes information presented by participants.
- b. TEACHERS (regular and/or special education): Present specific information about class performance, observational data and school adjustment.
- c. EVALUATION TEAM MEMBERS (i.e., psychologist/psychometrist): Present information from the individual pupil study relating to intellectual and perceptual abilities, academic achievement on individual standardized tests, and the emotional/behavioral status of the student.
- d. PARENTS: Present information about adjustment of the student at home and in the neighborhood, and state successful and unsuccessful measures to solve the problem.
- e. OTHER TEAM MEMBERS (i.e., therapist, social worker, friend/advocate): Present information relevant to their area of involvement, identify needs, and help develop alternatives and recommendations.

A written case conference report will summarize the decisions of the Case Conference Committee. The report must include a description of each evaluation, test, record or report used as a basis for the program; dissenting opinions, if any; and placement recommendations. If recommended for special education placement, an IEP will be included. Other pertinent information may also be included.

D. Individualized Education Program (IEP)

Indiana's Rule S-1 requires school corporations to provide a free, appropriate public education to handicapped students between the ages of 5-18. The school must provide an IEP for every handicapped student in need of special education and related services. An IEP is a written agreement regarding what the student needs and what will be done to address those needs. By law, an IEP must include the following five (5) components: (1) a statement of the student's present levels of

educational performance; (2) a statement of annual goals, including short-term instructional objectives; (3) a statement of specific special education and related services to be provided and the extent to which the student will be able to participate in regular education programs; (4) the projected dates for initiation of services and the anticipated duration of services; and (5) the procedure and schedule for determining (at least annually) whether the short-term objectives are being achieved. If a student is enrolled in a program for the emotionally handicapped, then goals and objectives to address the specific behavioral/emotional problems should be included in the IEP.

E. Annual Case Review

If a student is already in special education, the case conference committee must meet at least once a year to review and/or revise the student's educational program. This meeting is called the ANNUAL CASE REVIEW. Members attending include a qualified representative of the school, teachers, parents, appropriate specialists, the child, if appropriate, and others at the discretion of the parent or school.

SECTION 2
DUE PROCESS

Many procedural safeguards are available to handicapped students and their parents which assure that due process is provided. The entire process from referral to placement (or no placement) is conducted in a manner which will protect the rights of the emotionally handicapped. Among these safeguards are:

A. Protection in Evaluation

- The right to have the evaluation done in a way that is not biased, and conducted in such a manner that safeguards are observed.

B. Additional Evaluation

- The right to have the student tested by professional persons outside the school system at the parent's expense and to have that evaluation considered by the school. The right to request an independent evaluation at the school's expense if the parent disagrees with the school's evaluation.

C. Individualized Educational Program

- The right to have a Case Conference Committee determine eligibility for special education and prepare an individual education program (IEP).
- The right to an Annual Case Review Conference to revise or review the individualized education program.

D. Hearing Rights

- The right to request a hearing before an independent hearing officer if the parents object to the planned evaluation.
- The right to request a hearing if the parents oppose the proposed program.
- The right to appeal to the Special Education Board of Appeals after hearing procedures have been followed.

E. Least Restrictive Environment

- The right to have the student educated in the least restrictive environment which appropriately meets the student's needs.

F. Confidentiality

- The right to examine and copy all of the student's school records.
- The right to have the student's education records treated in a confidential manner, including the right to request amendments to the records.

G. Complaint Procedure

- The right to initiate a complaint with the Division of Special Education concerning the procedures adopted by the local education agencies in the implementation of Rule S-1.

SECTION 3

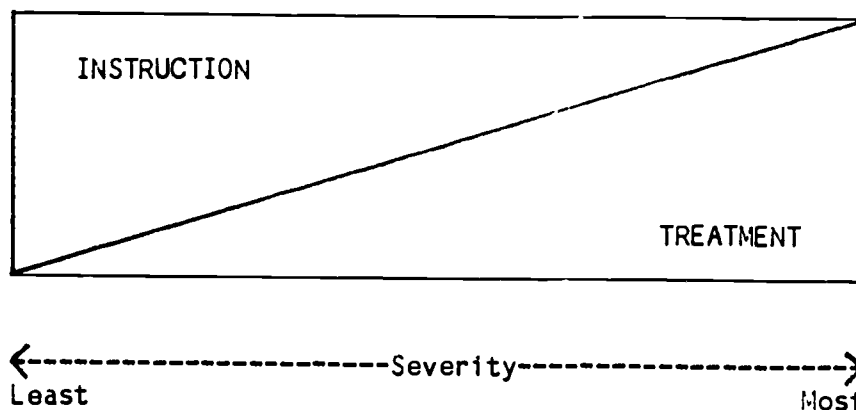
CONTINUUM OF SERVICES

One of the most significant tenets of federal law regarding the education of the emotionally handicapped is the concept of placement in the least restrictive environment (LRE). LRE means placement in the educational environment which is the most consistent with the student's needs, as well as placement with nonhandicapped students to the greatest extent possible.

This area has received renewed emphasis as schools have moved from the provision of basic services to the more qualitative aspects of programming. Many different kinds of placement are possible, depending upon the needs of the individual student. Placements along the continuum of services may range from attending a regular class full-time with periodic consultation from a special teacher, to spending a few hours each week in a resource room, to attending a special class full-time, to placement in a residential program.

The availability of a full continuum of services is especially relevant to the provision of services to the emotionally handicapped. Perhaps in no other area of exceptionality is there such a broad range of students with whom to deal in terms of the severity of the handicap and the very real potential for movement across the continuum.

In order for the potential of movement across the continuum to be realized, it is essential that resources and services (TREATMENT) be available within the community to complement the educational programming (INSTRUCTION) occurring within the educational environment. The following figure may serve to graphically represent this concept.



Although the diagonal line cutting across this figure may, at times, be blurred, it does serve to point out the fact that a shared responsibility exists between the family, the educational community, and other community agencies (mental health, probation, welfare, etc.).

SECTION 4

PROGRAMMING - EMOTIONALLY HANDICAPPED

A. Individualized Education Program - Implementation

The IEP establishes long term goals and objectives, which provide an ongoing framework for the direction of the student's school program. The IEP provides the teacher with a systematic process of delivering services to the student. Using the IEP, the teacher(s) can develop daily lesson plans to meet the student's individual educational needs.

Educational goals are initially developed through the Case Conference/IEP process. They take into consideration the unique needs of the student, including both the student's strengths and weaknesses (real and relative). Generally, teachers make the primary decisions on teaching methods. They consistently utilize best practices and gradually develop unique strategies specific to the individual student. Systematic evaluation allows teachers to make adjustments in their strategies.

B. Curriculum Components

A well-defined curriculum is very important to the success of programs which are intended to meet the needs of emotionally handicapped students.

The classroom should be well-structured, and there should be clearly defined, consistent rules. A behavior management program should be in place, and affective education should be an integrated part of the everyday activities. Finally, increasing attention should be directed toward the vocational training needs of the students identified as emotionally handicapped.

1. Academics

Whenever possible, the academic programming in a EH classroom will follow the school's regular academic program. Incorporated into this will be each student's individual goals and objectives based on his/her own academic needs. Specialized strategies and approaches may be utilized to address these needs. The balance between academics and behavior management will vary for each student according to his/her needs. The goal of an EH class is to always move each student back to the regular classroom to the fullest extent possible, as quickly as possible.

2. Vocational Education

Vocational education can assist many EH students in becoming productive, successful adults. A comprehensive curriculum for vocational/career education for emotionally handicapped students will include:

- a. Development of appropriate personal social skills to ensure benefit from educational, vocational, and/or occupational experiences.
- b. Development of appropriate daily living skills to increase independent functioning in the school, family, and community.
- c. Acquisition of job readiness and career skills to secure and maintain a working position in society.

3. Classroom and Behavior Management

A well-managed classroom is essential for successful programming for EH students. A carefully managed and structured classroom allows teachers to use academic instruction as a means of achieving behavioral goals. Behavior management in an EH classroom is the process of fairly and ethically maintaining and developing appropriate student behaviors through a variety of approaches. The long term goals of behavior management are: to help the student master appropriate behaviors; to use them successfully in a variety of settings; to maintain them over time; and most importantly, to internalize their use.

4. Affective Education

Affective education is systematic instruction to help students acquire information, attitudes, and skills which will encourage appropriate social and emotional behavior. Because of their handicaps, emotionally handicapped students either don't acquire or don't use information about appropriate ways of behaving. Affective education is based on the belief that the students are able to utilize skill instruction and information about their behavior when provided the opportunity.

SECTION 5

FACILITATING INTERAGENCY COOPERATION

The importance of communication cannot be over emphasized. Having a working knowledge of other agencies is imperative, but knowing the individuals within those agencies can be of tremendous benefit and can expedite the delivery of services. Frequently, informal contacts can bridge many of the common problems we face in interagency cooperation.

Emotionally handicapped students often have a long history of difficulties and associations with various agencies. Parents and service providers can become frustrated or disheartened by the long history of difficulties. These difficulties, along with the more common problems, make good communication even more crucial.

In the interest of effective communication, the following list of ideas is offered.

1. Remember schools have legal constraints that require parental written consent to release information. Having releases signed will expedite exchange of information.
2. Having a designated person to maintain contact with schools may help in developing better understanding and improved communication.
3. Define needs accurately and make sure the problem or request is expressed clearly.
4. Schedule face-to-face meetings which make it easier to express real concerns. These face-to-face meetings will yield many indirect benefits and aid in solving future problems.
5. Do not minimize a problem--this may set the stage for minimal concern. Clearly state your concern or request, citing examples and specifics.

Good and frequent communication can go a long way in helping overcome feelings of isolation or frustration which all persons feel when working with difficult situations. Communication can provide an excellent support system for individuals and agencies--support that frequently builds bridges toward success.

Refer to the following tip sheet for further suggestions.

Tip Sheet

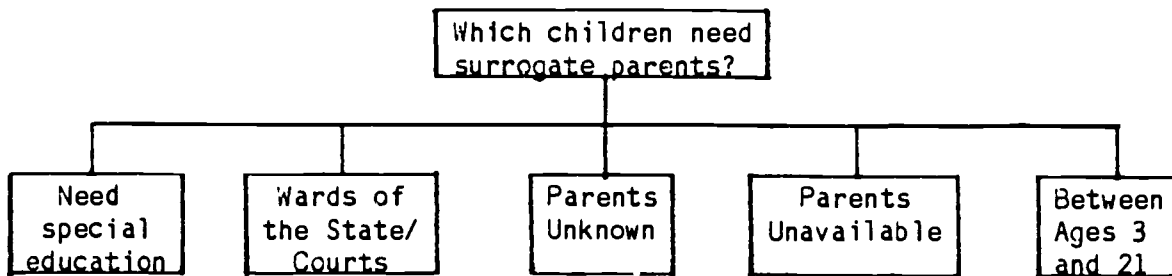
1. Give EH students and others options and choices. Help them explore consequences.
2. Know the background of the student.
3. Help EH students and others set reasonable goals.
4. Make the parent a real partner.
5. Find the common ground with other agencies: the student and his/her needs.
6. Good interagency communication helps avoid duplication of services.
7. Be patient - good cooperative planning takes time.
8. Maintain contact with schools and other agencies who have direct and indirect contact with student.
9. Have realistic expectations of collaborative efforts.
10. Face-to-face contact is important - try to have informal meetings (lunch, etc.) with other service providers.
11. Avoid we/they situations. Get to know other agency personnel.
12. Be creative problem solvers.
13. In case conference settings, do not allow interagency differences to detract from the focus on the student.
14. Watch hidden agendas - we all need to be up front.
15. Be sure you have updated release of information forms. Schools cannot share information with agencies unless parents provide written consent.
16. Don't hesitate to call the school contact person.
17. Be familiar with rules and regulations that the school must follow.
18. Watch jargon - we don't all speak the same lingo.
19. The best laid plans may not succeed; always have alternatives.
20. Positive contact may build rapport.

SECTION 6

SURROGATE PARENTS

Surrogate parents are generally unique to education so many agencies are not familiar with this concept. Surrogate parents may be involved with EH students if the students are wards of the court, in foster home placements, or residents of special facilities.

Public Law 94-142, The Education for All Handicapped Children Act of 1975, is the federal law that mandates the appointment of surrogate parents. Rule 5-1, which regulates special education programs in Indiana, also mandates that surrogate parents be assigned to eligible children.



Surrogate parents are entitled to the same rights that natural parents or guardians have in the educational process. Surrogate parents have the responsibility to act on behalf of the student to make sure he/she receives an education designed specifically to meet his/her needs and abilities.

The Family Educational Rights and Privacy Act regulates what information can be shared with schools and community agencies. Such information that is pertinent to the planning and implementation of the student's educational program and welfare is allowed to be shared. Surrogate parents are not given access to personally identifiable information about the student's family or background.

SECTION 7
CONFIDENTIALITY

Schools and school personnel are obligated to maintain information in a confidential manner. A signed release is required in order to exchange information. The release must be signed by the parent or legal guardian for students under eighteen years of age and by the student if ne/she is eighteen or older.

It is suggested that agency personnel ask their client and client's parents these types of questions:

- Has your child ever received special education services?
- Has your child been in special classes?
- Has your child ever been tested by a school psychologist?

If so, it is recommended that agency personnel obtain an information release signed by the parent or legal guardian. Agency personnel may want to consider including such questions as a part of regular intake procedure.

SECTION 8

CONTRACTED SERVICES - EMOTIONALLY HANDICAPPED

A. Contracted Services

In some cases, a school corporation may elect to contract with other agencies or private individuals to provide for specific services to emotionally handicapped students. Such services may include evaluation/diagnosis, consultation with school personnel, counseling services, crisis intervention, staff development, etc.

The specific motivations for a school corporation to enter into such contractual arrangements are varied and unique to individual schools and the communities they serve. Some of those reasons may include:

1. The school corporation may not choose to diagnose the existence of a serious emotional handicap without corroboration from a specialist.
2. The school corporation may choose to utilize the expertise of outside personnel in providing those services which are beyond the capabilities and training of existing school personnel.
3. By contracting services, a school corporation may be able to assist parents in developing relationships with agencies or individuals who can provide a treatment program which will complement the instructional program.

It is important for contracted service providers to understand exactly what the school corporation's reasons are for utilizing their services. For example, is an evaluation being requested for purposes of corroborating already existing diagnostic information, or is a complete evaluation required which may result in any number of diagnoses? Whatever the reason, it is the school's responsibility to let outside agencies and individuals "know from where they are coming."

The need to "know from where the school is coming" also extends to programmatic issues. For example, if a contracted service provider has been employed to provide consultative services to teachers and staff, it is important for that individual to know if school personnel are heavily committed to a behavior management program based on a token system, or is a token based system contrary to the practices of the school personnel.

In any event, the necessity for open communication and a basic understanding of existing practices and program design is of utmost importance in the effective use of contracted services.

In addition, the following list may provide school corporations and service providers with issues that need to be considered in contracted service arrangements:

1. Schools should be as specific as possible in delineating the services that are to be provided.
2. Although a formal contract may not be required, it is essential that any agreement be written and signed by an authorized representative of the school and the agency/individual.
3. The terms of the agreement should be specific in terms of cost, services to be provided, and time frames.
4. It is recommended that schools and service providers exchange as much information as possible regarding their respective organizations, practices, and procedures. Such communications can foster accuracy and avoid misunderstanding.
5. When contracting for assessment and evaluation services, schools should develop appropriate and complete referrals that clearly state the questions to be addressed by the evaluation.
6. Contracted evaluation service providers should be willing to participate in case conference meetings resulting from the evaluation. At the case conference meeting, the evaluator should be prepared to formulate behavior specific goals and objectives based on the results of his/her evaluation.
7. It is important for contracted service personnel to receive appropriate feedback from the school regarding the quality of the service being provided. Such evaluative information is invaluable in modifying the provision of future services and tailoring those services to the specific needs of the school.

B. Contracted Services Checklist

The following checklist may help identify important points in developing contractual agreements.

Understand the school's reasons for utilizing the agency's services. _____

Understand the school's program practices as they relate to the services offered by your agency. _____

Become familiar with the documents written by the Indiana Committee on the Emotionally Handicapped: "Operationalizing the Definition" and "A Continuum of Services for Emotionally Handicapped Students." _____

Understand the specific services the agency is being asked to provide. _____

Know applicable dates/timelines, etc. _____

Become familiar with the needs/abilities, etc. of the person(s) with whom the agency will be working. _____

Specify the individual within the agency to actually provide the services, and communicate this to the school. _____

Sign a written agreement with the school. _____

Discuss and agree upon cost. _____

Determine how ongoing communication with the school will occur. _____

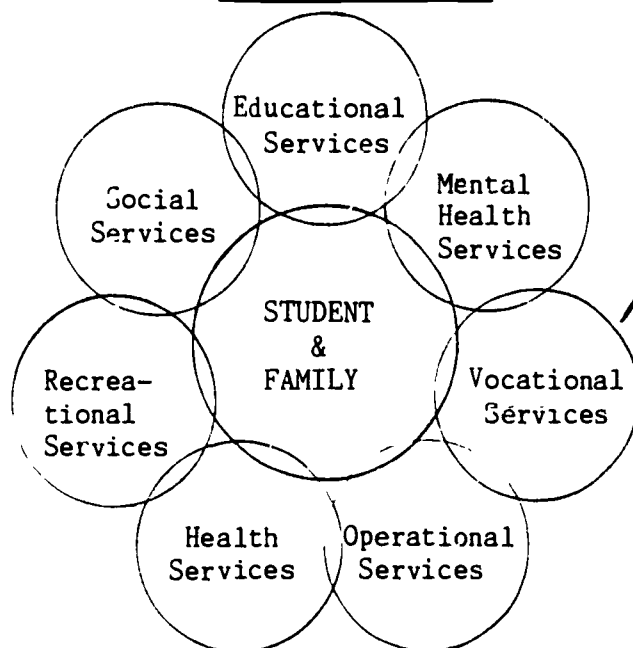
Develop intake procedures which include obtaining the releases of information necessary for providing this service. _____

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Appendix A

Service Systems/Agencies



Services

Function

Social Services	health services, family planning, housing, emergency financial aid, protective custody, respite care, foster care, adoption
Mental Health Centers	counseling, preventive programs, substance abuse prevention and treatment, independent living services, residential treatment services, crisis residential services
Legal Systems	rehabilitation for offenders
Vocational Training and Rehabilitation Agencies	job training and job-securing services
Associations representing Handicapped Persons	advocacy, lobbying, parent support, sheltered employment, job training
Telephone Hotlines	emergency counseling, suicide prevention, child abuse help
Big Brother/Big Sister	provides appropriate volunteer role models
YMCA, YWCA, Parks and Recreation	recreation and leisure programs
Youth Organization	scouts, 4-H, Junior Achievement
Health Services	health education and prevention, screening assessment, primary acute, or long-term care
Operational Services	transportation, advocacy, legal services, volunteer programs, self-help and support groups

Appendix B

Contact Personnel for EH Students

<u>DESCRIPTION</u>	<u>NAME</u>	<u>AGENCY</u>	<u>PHONE NUMBER</u>
Special Education Director	_____	_____	_____
School Psychologist	_____	_____	_____
Other Agency Personnel (DPW, probation, etc.)	_____	_____	_____
_____	_____	_____	_____
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Case Log for EH Students



ERIC
Full Text Provided by ERIC

Appendix D

Goal Planning

Helping the EH student set and achieve reasonable goals can be approached systematically:

PROCESS

What is the overall goal you/the student wish to achieve?



How can the goal/task be broken down into smaller parts?



Which of the smaller parts has the student already demonstrated successfully?



Which part/skill does the student need to accomplish next?



Can this skill/part be broken down further?



If so, which step will the student begin with?



When and where will you expect this skill to be demonstrated?



How much assistance will be allowed/required to perform the skill?



How will you measure whether the student has achieved the skill?



Write your goal, incorporating the above information.

EXAMPLE

be able to keep a job

1. demonstrate appropriate social behaviors
2. be well-groomed
3. dress appropriately
4. be on time
5. follow directions from superiors
6. be able to perform each task required of job

#'s 1 through 4

#5

1. look at speaker
2. listen carefully
3. ask questions about anything not understood
4. repeat directions in own words

#4

in place of work/during work hours

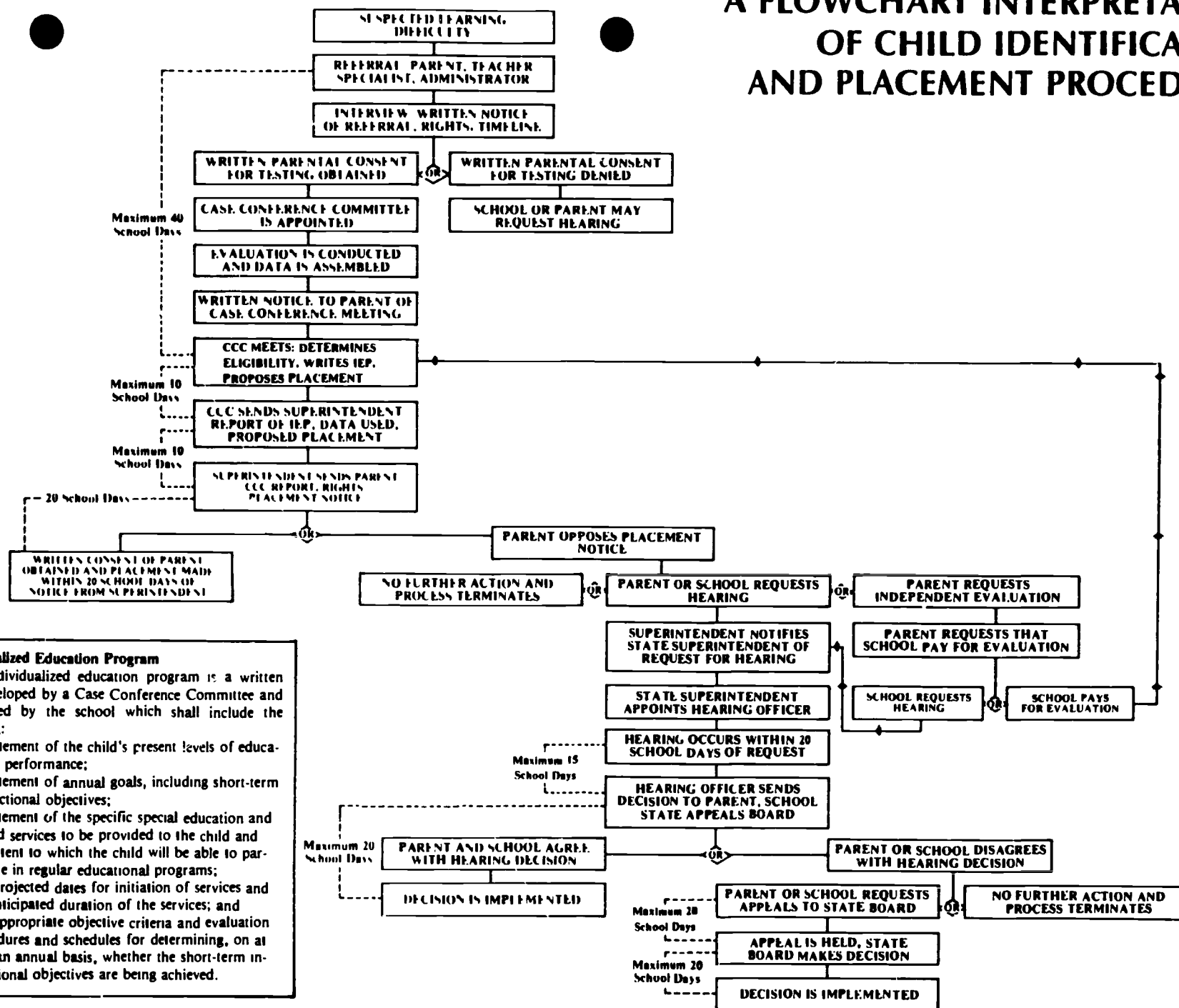
without assistance or prompts

Student's superior reports directions are consistently followed correctly.

Student will consistently repeat directions given him in his own words and follow them correctly without assistance, as confirmed by his superior(s).

A FLOWCHART INTERPRETATION OF CHILD IDENTIFICATION AND PLACEMENT PROCEDURES

Appendix E



Individualized Education Program

An individualized education program is a written plan developed by a Case Conference Committee and maintained by the school which shall include the following:

1. A statement of the child's present levels of educational performance;
2. A statement of annual goals, including short-term instructional objectives;
3. A statement of the specific special education and related services to be provided to the child and the extent to which the child will be able to participate in regular educational programs;
4. The projected dates for initiation of services and the anticipated duration of the services; and
5. The appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short-term instructional objectives are being achieved.

NOTE: Local policies (pre-referral activities, local complaint procedures, etc.) are not necessarily reflected in the above flowchart interpretation.

GLOSSARY

Adaptive Behavior - the degree to which a person meets the standards of social and personal responsibility for his/her age and culture.

Affective Education - systematic instruction to help students acquire information, attitudes, and skills which will encourage appropriate social and emotional behavior. (See page 9 for more information.)

Annual Case Review - a case conference committee meeting at least once a year to review and/or revise the student's educational program.

Behavioral Consultation - a systematic problem-solving process to guide teachers and parents to problem solution. Its goal is to modify the behavior of the child in the setting in which it takes place.

Case Conference - a scheduled meeting of school personnel, parents (guardians or surrogate parents) appropriate specialists, the child, if appropriate, and other individuals at the discretion of the parent or school to develop, review and revise a handicapped student's individualized education program (IEP).

Complaint - allegations regarding actions taken by any public agency that are contrary to the requirements of free appropriate public education.

Continuum of Services - may range from attending a regular class full-time with periodic consultation from a special education teacher, to spending a few hours each week in a resource room, to attending a special class full-time, to placement in a residential program.

Evaluation - the process of gathering information about a student.

Family Education Rights and Privacy Act (FERPA) - "Buckley Amendment" - the federal "right to know" that entitles parents access to their children's school records, restricts the release of records to other people, and provides a mechanism through which parents can challenge information contained in the records.

Goals - the "end result" expected at a certain point in time.

Hearing - an issue relating to identification, evaluation, appropriateness of placement, and/or other issues regarding interpretations of special education law.

Individualized Education Program (IEP) - a written agreement regarding what the student needs and what will be done to address those needs. An IEP must include the following five (5) components: (1) a statement of the student's present levels of educational performance; (2) a statement of annual goals, including short-term instructional objectives; (3) a statement of specific special education and related services to be provided and the extent to which the student will be able to participate in regular education programs; (4) the projected dates for initiation of services and the anticipated duration of services; and (5) the procedure and schedule for determining (at least annually) whether the short-term objectives are being achieved.

Least Restrictive Environment (LRE) - placement in the educational environment which is the most consistent with the student's needs, as well as placement with nonhandicapped students to the greatest extent possible.

Multidisciplinary Team - a team of people involved in the educational evaluation of a child. This team may include, but is not limited to, a school psychologist or psychometrist, teacher(s), parent(s), and other specialists with knowledge in the suspected area of disability.

Objectives - measurable "steps" necessary to reach a goal.

Procedural Safeguards - those provisions within legislation which establish procedural due process for handicapped children and their parents or guardians, including notice, participation, and right of appeal. Significant among these rights or safeguards is parent participation in the development of the IEP.

Public Law 94-142 - the federal law which requires public schools to provide special education programs and related services without charge.

Public Law 99-457 - a federal law which extends the provisions of Public Law 94-142 to children from 3-5 years of age and provides for services for infants through age two. States have an option to participate. Lead agencies for the program in Indiana: Department of Mental Health, ages 0-2; Department of Education, ages 3-5.

Referral - the first step in obtaining an evaluation for a child who may be in need of special services; may be made by school personnel, parent, or child.

Related Services - developmental, corrective, and other supportive services as are required to assist a handicapped child to benefit from special education. Includes services such as transportation, speech, physical therapy, occupational therapy, audiology, etc.

Rule S-1 - the state regulation which implements the provisions of Public Law 94-142 for special education programs and related services without charge by the public schools of Indiana.

Seriously Emotionally Handicapped - a severe condition exhibited over a long period of time to a marked degree which adversely affects educational performance and is characterized by one or more of the following: (a) an inability to learn which cannot be explained by intellectual, sensory, or health factors (including children who are autistic); (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teacher; (c) an inappropriate type(s) of behavior or feeling under normal circumstances (does not include children who are only socially maladjusted); (d) a general pervasive mood of unhappiness or depression; and (e) a tendency to develop physical symptoms or fears associated with personal or school problems.

Special Education - specially designed instruction, including necessary related services, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions.

Surrogate Parent - have the responsibility to act on behalf of the student to make sure he/she receives an education designed specifically to meet his/her needs and abilities and are entitled to the same rights that natural parents or guardians have in the educational process.

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